



PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of : March 31, 2004  
S. Parkin : Group Art Unit: 1762  
Serial No.: 10/646,246 : Examiner: Unknown  
Filed: August 22, 2003 : San Jose, California  
Title: MgO Tunnel Barriers and Method of Formation

**SECOND PRELIMINARY AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

Please amend the above-identified application as specified herein.

**ARC920030057US1**

-1-

**10/646,246**

04/07/2004 JBALINAH 00000053 090441 10646246  
01 FC:1202 36.00 DA



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# TRANSMITTAL FORM

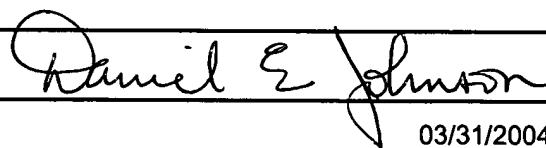
(to be used for all correspondence after initial filing)

		Application Number	10/646,246
		Filing Date	08/22/2003
		First Named Inventor	S. Parkin
		Group Art Unit	2652
		Examiner Name	Unknown
Total Number of Pages in This Submission	25	Attorney Docket Number	ARC920030057US1

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Remarks	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Daniel E. Johnson	
Signature		
Date	03/31/2004	

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O.Box 1450, Alexandria, VA 22313-1450 on this date:

03/31/04

Typed or printed name	Cheryl G. Ruby		
Signature		Date	03/31/2004

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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 36.00)

## Complete if Known

Application Number	10/646,246
Filing Date	08/22/2003
First Named Inventor	S. Parkin
Examiner Name	Unknown
Group Art Unit	2652
Attorney Docket No.	ARC920030057US1

## METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 09-0441  
Deposit Account Name IBM CORPORATION

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:

Check  Credit card  Money Order  Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee Description	Fee Paid
101	740	201	370 Utility filing fee	
106	330	206	165 Design filing fee	
107	510	207	255 Plant filing fee	
108	740	208	370 Reissue filing fee	
114	160	214	80 Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)

## 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	2 x 18.00	= 36.00
Multiple Dependent	- 3** =	84.00	= 0.00

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee Description
103	18	203	9 Claims in excess of 20
102	84	202	42 Independent claims in excess of 3
104	280	204	140 Multiple dependent claim, if not paid
109	84	209	42 ** Reissue independent claims over original patent
110	18	210	9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 36.00)

\*\*or number previously paid, if greater; For Reissues, see above

## 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 Surcharge - late filing fee or oath	
127	50	227 Surcharge - late provisional filing fee or cover sheet	
139	130	139 Non-English specification	
147	2,520	147 2,520 For filing a request for ex parte reexamination	
112	920*	112 920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
115	110	215 Extension for reply within first month	
116	400	216 Extension for reply within second month	
117	920	217 Extension for reply within third month	
118	1,440	218 Extension for reply within fourth month	
128	1,960	228 Extension for reply within fifth month	
119	320	219 Notice of Appeal	
120	320	220 Filing a brief in support of an appeal	
121	280	221 Request for oral hearing	
138	1,510	138 Petition to institute a public use proceeding	
140	110	240 Petition to revive - unavoidable	
141	1,280	241 Petition to revive - unintentional	
142	1,280	242 Utility issue fee (or reissue)	
143	460	243 Design issue fee	
144	620	244 Plant issue fee	
122	130	122 Petitions to the Commissioner	
123	50	123 Processing fee under 37 CFR 1.17(q)	
126	180	126 Submission of Information Disclosure Stmt	
581	40	581 Recording each patent assignment per property (times number of properties)	
146	740	246 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249 For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279 Request for Continued Examination (RCE)	
169	900	169 Request for expedited examination of a design application	
Other fee (specify) _____			

\*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ 0.00)

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Daniel E. Johnson	Registration No. (Attorney/Agent)	37,033	Telephone	408-927-3367
Signature		Date	03/31/2004		

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